FOR INSTRUCTIONS, SEE BACK OF FORM

### DISCLOSURE SUMMARY PAGE

File with: lows Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective Mey 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

FRAKIN

2012 OCT 19 AM 6: 59

	- leation)	
COMMITTEE NAME (Must be same as on Statement of Orga	anization)	FORM
Ed Hanig For Franklin County Sheriff  IMPORTANT: Indicate by # type of committee you are reporting for:  (1) Statewide/Legislative/Judge Standing for Retention Candidate (  (2) Statewide/Legislative/Judge Standing for Retention Candidate (  (3) County Candidate (6) City Cand	17 15-bas Beard or Other Political	DR-2 (Rev. 12/2009) DISCLOSURE REPORT For Office Use Only
(4) County Central Committee (5) County PAC (9) City PAC (10) School Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	Board or Other Political Subdivision PAC	Comm. # 18935
CANDIDATE COMMITTEES ONLY:	Political Party (if applicable)	Scanned TA
Candidate Name Ed Hanig	Democrat	Computer
	District (if Senate or House)	Audited
Office Sought  Eranklin County Sheriff		
Eranklin County Sheriff  Late reports are subject to possible civil and criminal penalties. Pecandidate's committee, and the chairperson, for any other type of	rsuant to lowa Code sections 68B.32A(7 committee, is the individual responsible for	) and 68A.401(3), the candidate, for a or filling timely and accurate reports.
F // -	6411-891-8341	10-18-12
SIGNATURE OF PERSON FILING REPORT	641-892-1341 TELEPHONE	DATE SIGNED
I AM FILING A 10/12/2012	REPORT FOR (1) ELECTION /	(2)NON-ELECTION YEAR.
(report date)	Indicate by #	
CHECK IF AMENDMENT TO REPORT DATED		Local Committees, enter Date of Election
STATEMENT OF CASH ON HAI	ND	
CASH ON HAND at the beginning of the reporting period. (1 committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	e cash on hand at the end	\$ 130,50
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total	(Attach Schedule A) (*also	see in-kind below) 1320.00
Schedule F: Loans Received total	(Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (At	ttach Schedule H)	0.00
(Schedule H applies to Candidates' Cor	mmittees Only)	
	SUB-TOTAL	\$ 1450.50
SUBTRACT TOTAL MONEY SPENT THIS PERIO	DD	
Schedule B: Expenditures total (Attach Schedule I	B) (**also see debts and loans below)	
Schedule F: Loan Repayments total (Attach Sched	dule F)	0.00
CASH ON HAND at the end of this reporting period (if final r	eport balance must be zero)	\$ 338.5
***UNPAID BILLS (From Schedule D - Attach Schedule D)		5 0.00
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sch	nedule E)	
**OUTSTANDING LOANS (From Schedule F - Attach Sched	dule F)	\$ 0.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	10	YES X NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Al	ttach Schedule H)	\$ 0.00

### FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
CHEC AME	CK THIS BOX IF

COMMITTEE NAME	(Must be san	ne as on Stateme	ent of	Organization,

DATE ID NUMBER (if applicable) AND PAC CHECK NUMBER (ID# KLMJ P.O. Box 495 Hampton, CK#1006 IA 50441 (DESCRIBE TRANSACTION)  CANDIDATE EXPENDITURE (Disbursement) WAS MADE (DESCRIBE TRANSACTION)  EXPENDED (DESCRIBE TRANSACTION)	Ed Hanig for F	ranklin County S	heriff	PURPOSE	AMOUNT
CK#1006	DATE EXPENDED (MWDD/YR)	ID NUMBER (if applicable) AND PAC CHECK	EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
ID#   Mid-American Publishing 2 <sup>nd</sup> St NW   Newspaper ads and Political Flyers   \$410.00     ID#   Sheff   L foblic   harm   Co ping   5000     ID#   CK#     ID#   CK#   CK#   ID#   CK#   CK	0/12/12	ID#	KLMJ P.O. Box 495 Hampton,	Political Broadcast	
CK#1005   Hampton, IA 50441   \$410.00     ID#		CK#1006	IA 50441		\$702.00
ID#   Sheff   L Rblic 1, bran   Coping   5000     ID#   CK#     ID#   COping     ID#	10/12/12	ID#	Mid-American Publishing 2 <sup>nd</sup> St NW	Newspaper ads and Political Flyers	
ID#   CK#     ID#   CK#     ID#   CK#     ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   ID#   CK#   CK#   ID#   CK#		CK#1005	Hampton, IA 50441		\$410.00
ID#   CK#     ID#   CK#     ID#   CK#     ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   CK#   ID#   ID#   CK#   CK#   ID#   CK#		ID#	Shape II Poble I have	Coping	5000
CK#  ID#  CK#  ID#  CK#  ID#  CK#  ID#  ID#  ID#  ID#	10-18-12	CK# /007	Shelfie to foot Tistary		
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CK#		CK#			
ID#		ID#			
		СК#			
CK#		ID#			
		CK#			

SUB-TOTAL

\$ 7/162.00

TOTAL (if last page of this schedule)

\$ 116200

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	~4	
raye	Of	

MONETARY

CHECK THIS BOX IF

RECEIPTS

SCHEDULE

A

(Rev. 07/03)

### 6418924327

### For Instructions, See Back of Form

## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

(Including Cardinate P	AMENDING FOR
COMMITTEE NAME (Must be same as on Statement of Organization	
County Sheriff	
Ed Hanig for Frankin County Shows	E PAC (POLITICAL ACTION COMMITTEE), LIST THE PACTICAL ACTION COMMITTEE, LIST THE PAC

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION
NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN
DISCLOSURE BOARD

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 688.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	F FOR FUND- RAISER INCOME
10/12/12	ID# CK#5036	Mr. Or Mrs. Eugene Sukup 1379 Beeds Lake Hampton, IA 50441	Friends	\$200,00	
09/19/12	ID# CK#822	Democratic Central Comm. Of Franklin County Hampton, IA 50441		\$750.00	
09/18/12	ID# CK#2374	Eldean or Dorthy Madetzke 508 1st AVE SE Hampton, IA 50441		\$100.00	
10/10/12	ID# CK#9341	Jim or Diana L. Blood PO Box 7 Sheffield, IA 50475		\$250,00	
07/18/12	!D# CK#3787	Marilyn D. Sheahan PO Box 39 Sheffield, IA 50475		\$20.00	
	ID# CK#				
	ID#		The Marketine of Science of Control of State of Science		
	ID#				
All	CK#				Antibania solamana
	CK#				
	CK#		SUB-TOTAL		

TOTAL (If last page of this schedule)

\$1320.00 \$1320.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinty (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no

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FOR INSTRUCTIONS. SEE BACK OF FORM



### THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

COMMITTEE NAME (Must be same as on Statement of Organization).

Ed Hanig for Frank in County Sheriff

H (Rev 02'08)	CAMPA GN PROPERTY
EACH RE	CHEDULE H TO PORT, MAK NG AS REQUIRED
CHECK	THS BOX F

ART ONGO NG NV	ENTORY OF CAMPA GN PRO	ZERIT	
Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
20 May 1 May 2 May		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$

SALES OR TRANSFERS OF CAMPA GN PROPERTY \*\* PART Name and Address of Purchaser/Dones Scd? Description of Property Sale Price Value of Date (MM/DD/YR Donation TOTALS

Page Of (For Schedule H) Pages

<sup>\*</sup> f estimated, show est, beside figure

<sup>\*\*</sup> PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ (Attach Additional Schedules if Needed)